

Tempe Parks and Recreation

3500 South Rural Road, Tempe, AZ 85282



"All City" Competitive High School Boys Basketball League

League Information

- Current high school students (current ID will be required) playing basketball in an organized setting. Games are held Monday-Thursday evenings. Each team will play 2 games per week.
- Season runs: June 2nd through early July.
- **The leagues will be made up of individuals who sign up together as one team**, as well as those who sign up on their own and are combined by the City to make up a team, provided that enough individuals sign up.
- Games will be played at local schools in Tempe. League standings will be kept for teams.
- Teams will play High School Rules with 20-minute halves, two officials, a gym supervisor, and a scorekeeper. Teams will play 8 games plus a post-season tournament.

Fee

Team: \$250 Per Team - Individuals sign up as a whole team (Complete registration form on backside of this form)

Individual: \$50 per individual - Individuals will be put on teams of 8 or more players. (Complete registration form below) Registration

Additional Information

| | |
|---------------------------|--------------|
| Shane Isabell | 480-350-5222 |
| Parks & Recreation: | 480-350-5200 |
| TDD for hearing impaired: | 480-350-5050 |
| FAX | 480-350-5278 |

High School Boys Basketball League – Individual Liability Form

| | | | |
|-------------------------|-------------|---------------------|------------------|
| Participant Name: _____ | Age _____ | Current Grade _____ | Height _____ |
| Address: _____ | APT # _____ | City _____ | Zip _____ |
| Phone: Eve _____ | Day _____ | Additional _____ | Additional _____ |

Waiver of Liability

With knowledge and appreciation of the risk of injury, I wish to participate in this Activity. I agree to assume the risk of personal injury while participating. I understand the City of Tempe does not carry accident, sickness, or medical insurance for participants. I understand that all reasonable efforts will be extended to insure my health and safety. If the Class/Activity includes any physical exertion, I agree to perform the exercise at my own ability level. I fully understand the nature of this Class/Activity, and I waive and release and hold harmless the City of Tempe and any of its agents, employees, officers, council members, and sponsors for any and all rights and claims for damages or costs I may have against the City of Tempe, its agents, employees, officers, council members, and sponsors for personal injury, death, or property damage suffered by me, or that I may cause to others, as a result of my participation in this Class/Activity. I agree to look to my private physician for medical advice and care and to notify my teacher or instructor of any physical limitations I might have or modifications I might need to the Class/Activity. I will require the following accommodation to participate: _____

I have read and clearly understand the above statements. I realize this is a contract between myself and the City of Tempe and is a release of Liability. I sign it of my own free will.

REQUIRED: Parent or Legal Guardian Signature AND Printed Name

Date

Code: SPORT29B

Tempe Parks and Recreation

Info: 480-350-5200 / TDD: 480-350-5050

www.tempe.gov/pkrec

L:\SPORTS\YTH BASKETBALL\Boys High School



Boys High School Competitive League Summer 2005 Registration Form



*****Note- Roster will be not be complete unless individual Liability form is complete for each participant. *****

(PLEASE PRINT: USE BLACK INK ONLY)

TEAM NAME _____

COACH/PERSON IN CHARGE _____

ADDRESS _____ CITY _____ ZIP _____

HOME PHONE _____ WORK PHONE: _____ CELL/MOBILE _____

PAGER/OFFICE PHONE _____ FAX _____ E-MAIL _____

Circle the League you are requesting:

RECREATIONAL

COMPETITIVE

| Player | Address | City | Zip | Phone | Grade | Age | Height |
|--------|---------|-------|-------|-------|-------|-------|--------|
| 1. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 2. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 3. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 4. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 5. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 6. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 7. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 8. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 9. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 10. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 11. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 12. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| 13. | _____ | _____ | _____ | _____ | _____ | _____ | _____ |

ROSTER IS DUE WHEN FEE IS PAID. NO EXCEPTIONS.

Rosters must be filled out completely with the address and phone numbers of each player. Roster will be checked for validity purposes. **Rosters that do not contain complete address and phone numbers of players will not be considered for league entry.** As the representative of my team I have read and agree to all the rules and regulations of the Tempe Basketball League, and verify to the best of my knowledge that all information given on this form to be true and accurate.

Coaches Signature _____

Date _____